## RECEIVED

## STATE OF SOUTH DAKOTA

## Statement of Legal Newspaper Ownership and Circulation 15 2016

	to: Secretary of State, 500 I	E. Capitol, Pierre, SD	57501-5077	S.D. SEC. OF
1. TITLE OF NEWSPAPER	re Hoven Review	AND THE	2. DATE 9	-27-2016
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLISH 52		HED ANNUALLY	3B. ANNUAL SUBS	CRIPTION Stake
4. COMPLETE MAILING ADDR	PUBLICATION (Street			
(Not printers) PO Box 37, 69 2nd Ame E, Hoven. SO 57450-0037				
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE				
PUBLISHER (Not printers) The	Hover heview, Pobox	37,69 2 nd Ave,	E., Huen, SO 5	17450 -0037
6. FULL NAME OF PUBLISHER: Hoven Modicy Inc.				
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the				
names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.				
FULL NAME COMPLETE MAILING ADDRESS				
list on Back				
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so				
state. If more space is needed, list on back of this form.				
Plains Commerce Bank, 220 Main St. Hover, SO 57450				
9. EXTENT AND NATURE OF CIRCULATION		AVERAGE NO. CO EACH	ACTUA	L NO. COPIES SSUED
		ISSUED PRECEDIN MONTHS	NG 12 NEAREST	TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)		900		900
<ul> <li>B.PAID AND/OR REQUESTED CIRCULATION</li> <li>Sales through dealers and carriers, street vendors, and counter sales.</li> </ul>		80		46
Mail Subscription     (Paid and or requested)		489	- (	189
3. Paid Electronic Copies		0		0
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)		569	5	535
D.FREE DISTRIBUTION  1. BY MAIL, CARRIER OR OTHER MEANS		0		0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		5		5
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		574	5	,40
F. COPIES NOT DISTRIBUTED  1. Office use, left over, unaccounted, spoiled after printing		376		60
2. Return from News Agents		0		>
G.TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)		900	90	
Statement must be signed by I swear that the statement	Publisher, Business Mana s made by me are true, o	ger, or Owner in the correct, and compl	e presence of a Nota	ry Public
(Signature)		Triencial()	(Title)	
State of South Dakota	)	Sworn to before me to	this 28 day of Se	ptembet 2016
County of Edmunds	Notary Public			
(Seal)	Paora de la companya della companya della companya della companya de la companya della companya	My commission exp	ires: May 27,	901,1

Form: SOS REC 051 9/2016

STATE Days Duenwold hoya Hack hyle howeger

Bill and Gloria Duenwold 15433 316 Aue, Hoven, SD 57450 15:333 36 Aue, Hoven, SO 57450 Po Box 31, Hover, 50 57450 288 3rd Aug. Hoven, SO 57450

